EXHIBIT 5-B

Local Grantee
Claim Spreadsheet Instructions
OTS 39 & 39a (Rev. 8/06)

Beginning October 1, 2004, "local" grantees must use the OTS Claim spreadsheet when submitting reimbursement claims. This form is designed to pre-enter redundant information. OTS conducted a survey of submitted claims, noting the most common errors. 65% of the errors found can be eliminated by using this form.

Opening the Documents:
Open the appropriate claim form based on the beginning date the grant agreement. The forms are saved in a zip file, therefore follow the on screen instructions, and save the file to your computer.

Claim Spreadsheet:
The form itself is set up in a spreadsheet format. Information entered into the "Agency Info" sheet will automatically transfer to the remaining spreadsheets. A tab is provided for each claim period.

Specific information carries forward to the next spreadsheet.
- All Agency Data entered on the "Agency Info" sheet
- Claim #s are pre-entered
- Period beginning and ending dates are pre-entered. The ending date entered on the 39a, transfers to the 39.
- Progress or Final check is pre-entered
- Less Prior Claims & Total Cost to Date carries forward to the next claim
- All totals automatically calculate

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Form Protection:

Each of the sheets within the spreadsheet is protected, allowing restricted entry into certain cells.
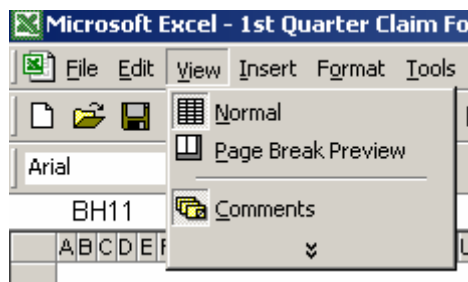
Entering Information:

Navigate through the locked forms by using the "Tab" key. By using this key all locked cells will be skipped, and only stop on those cells that entry of information is allowed.

The Arrow or Enter keys will stop on all cells. If entry of information is attempted, the following warning will appear:
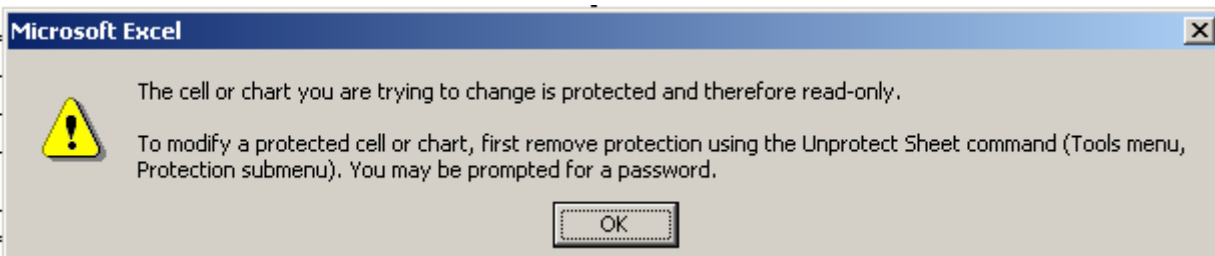
"Comments" - This form has reminder information provided directly on each sheet. To reveal the comment boxes, Click "View", "Comments".

"Multiple Entry" - Information may be entered onto more than one sheet at a time. To do this hold the "Shift" key and Click each tab that you want to enter data into (or click on the first and last sheet to highlight each sheet in-between). The tabs will turn white, indicating that each sheet is highlighted.

Scroll down and highlight the appropriate cell, and type the information.

Next, click on a non-highlighted tab to return back to only one sheet. The information is now on each of the highlighted sheets. This process can also be followed to format cells on multiple sheets.

Detailed Instructions:

   Download the Claim Spreadsheet from the OTS website **http://www.ots.ca.gov/forms/default.asp**, based on the grant start date.

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"Agency Info"
1. Click on the Agency Info Tab.
2. Add all agency information requested and as shown on the Page 1, Section D of the agreement.
3. Enter the negotiated Indirect Cost rate as shown on Schedule B of the grant agreement. (Enter 0 if there are no Indirect Costs in the agreement).
4. Save the data.

Quarterly Claim Information (OTS 39 and 39a)

Using the numeric tabbed sheets, enter reimbursement information and submit to OTS on a quarterly basis. Claim numbers are in numeric order starting with one for the first claim, **and continue in order throughout the grant**. Numbers do not start over each fiscal year.

Reference the Grant Budget to ensure costs claimed match the line items authorized in the budget for each category.

Tabs #1 - 12

All of the information from the "Agency Info" sheet will transfer to the remaining sheets. Navigate the form using the Tab key.

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Submitted By/Title

Stops 1 & 2

- Enter the name and title of the individual signing the grant claim. This must be an authorized individual. (See Chapter 5.2.2.)
- Signature: Only the individual identified can sign the claim.

Personnel Costs - Cost are reimbursed as negotiated within the grant agreement.

Stops 3 – 30

- Enter each position classification of personnel for which costs are being claimed. The classifications billed must match the classifications authorized in the Schedule B, Budget Estimate.
- Enter the actual regular grant salary and wage cost incurred for each position classification listed. (If Applicable)
- Enter the actual overtime grant salary and wage cost incurred for each position classification listed. (If Applicable)
- Enter the actual benefit cost incurred as a result of grant related salaries and wages claimed.

Stop 31

- Enter the percentage of listed personnel costs to be reimbursed if less than 100%.

Travel Expense

Stops 32 – 36 – In-State Travel

- List each in-state trip, and the individuals that traveled, included in costs billed.

Stop 37

- Enter the total cost for all in-state travel listed.

Stop 38-39 – Out-of-State Travel

- List each out-of-state trip, and the individuals that traveled, included in costs billed.

Stop 40

- Enter the total cost for all out-of-state trips listed.

Contractual Services

Stops 41 – 43

- Enter the name of each contractor being billed. Attach a copy of each contractor's invoice(s).

Stop 44

- Enter the total amount invoiced by contractor(s) listed. This amount should equal the total of all invoices attached.

Stop 45

- Enter retention percentage if applicable. The retention will automatically calculate.

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Equipment

Stop 46 – 65

- List each item of equipment, including the cost of modifications, attachments, accessories, or auxiliary apparatus necessary to make equipment usable for grant purposes including tax, shipping, and installation. If billed separately, list the equipment first, then the associated cost (i.e., motorcycle – radio installation).

Note: An OTS-25 (See Chapter 4.4.4 and EXHIBIT 4-A) and copies of invoices must be attached for reimbursement.

- Enter the amount for each equipment item listed. The amounts billed for each equipment item must reconcile to the attached invoices for that item and the equipment value listed on the OTS-25 (See EXHIBIT 4-A).

Other Direct Costs

Stop 66 – 101

- List cost items being billed for this period. These line items must match the line items approved in the Schedule B and B-1.

- Enter the amount for each cost item listed.

Indirect Costs

Items within this section automatically calculate based on previous information entered.